

Community Pathways Waiver – **Current Services**

Service Type: Statutory Service

Service (Name):

Alternative Service Title: **DAY HABILITATION**

HCBS Taxonomy:

Check as applicable

☐ Service is included in approved waiver. There is no change in service specifications.

☒ Service is included in approved waiver. The service specifications have been modified.

☐ Service is not included in the approved waiver.

Service Definition:

- A. Day Habilitation services desired outcomes include increased individual independence, reduction in service need, increased community engagement and/or movement to integrated competitive employment.
- B. Day Habilitation services are based on a person-centered plan and are intended to increase independence as well as develop and maintain motor skills; communication skills; and personal hygiene skills. Participants are taught skills that support specific individual habilitation goals that will lead to greater opportunities for integrated competitive employment at or above minimum wage and/or community integration including supported retirement. Individuals participate in structured activities in a variety of settings other than their private residence for the majority of the day.
- C. Day Habilitation services are provided in accordance with the individual's plan and developed through a detailed person-centered planning process, which includes annual assessment of the individual's employment goals and barriers to employment and community integration. Employment services are to be constructed in a manner that reflects individual choices, goals related to employment, and ensures provision of services in the most integrated setting appropriate. An individual's service plan may include a mix of Day Habilitation, Employment Discovery and Customization, Community Learning Services, and Supported Employment.
- D. Waiver funds will not be used for Vocational Services that: 1) teach job task specific skills required by a participant for the primary purpose of completing those tasks for a specific facility based job and 2) are not delivered in an integrated work setting through supported employment.
- E. For individuals who are being compensated, the individual's IP shall clearly indicate employment goals designed to lead to integrated employment at or above minimum wage,

measurable progress towards those goals on an annual basis, and how the services furnished to participants are not vocational in nature in accordance with 42 CFR 440.180 (c)(2)(i).

- F. In order to receive Day Habilitation, each individual's ability to receive services in an integrated setting must be assessed annually or when requested by the individual or their representative. Progress towards the individual's community integration and employment goals will be assessed and reviewed regularly.
- G. Day Habilitation includes the provision of other services which may be included in the IP if approved and funded by DDA to enable an individual to successfully participate in day activities which may include:
 - 1) Occupational therapy services, provided by or under the direction of a licensed occupational therapist for rehabilitation and habilitation for adults, shall be provided under the waiver when professionally recommended, included in the IP and shall include:
 - a) Specifications of the treatment to be rendered, the frequency and duration of that treatment, and the expected results;
 - b) Evaluation and re-evaluation of the waiver participant's level of functioning through the use of standardized or professionally accepted diagnostic methods;
 - c) Development and delivery of appropriate treatment programs which are designed to significantly improve a waiver participant's level of functioning within a reasonable period of time;
 - d) Selection and teaching of task-oriented therapeutic activities designed to restore physical functioning; and
 - e) Improvement of mobility skills.
 - 2) Physical therapy services, provided by or under the direction of a licensed physical therapist for the purpose of habilitation, shall be provided when professionally recommended and included in the IP and shall specify:
 - a) Part or parts of the body to be treated;
 - b) Type of modalities or treatments to be rendered;
 - c) Expected results of physical therapy treatments; and
 - d) Frequency and duration of treatment which shall adhere to accepted standards of practice.
 - 3) Social services, not provided under Program, shall be provided when included in the IP and shall include:
 - a) Identification of the waiver participant's social needs; and
 - b) Supports to assist the waiver participant's adaptation and adjustment to the environment.
 - 4) Speech pathology and audiology services, provided by or under the direction of a licensed speech language therapist or licensed audiologist for rehabilitation and habilitation for adults, shall be provided when professionally recommended and included in the IP and shall include:
 - a) Maximization of communication skills;
 - b) Screening, evaluation, counseling, treatment, habilitation, or rehabilitation of waiver participants with hearing, language, or speech handicaps; c) Coordination of interdisciplinary

goals related to hearing and speech needs; and d) Consultation with staff regarding the waiver participant's programs.

5) Medically necessary nursing services provided by a licensed registered nurse or licensed practical nurse shall be provided when professionally recommended, pre-authorized by the DDA including:

- a) Short-term skilled, non-delegated nursing tasks, unavailable under the State Plan home health benefit, as performed by the nurse to allow individuals to return to the community or stay in the community following a serious illness or hospitalization;
- b) Part-time or intermittent skilled, non-delegated nursing tasks, unavailable under the State Plan home health benefit, as performed by the nurse for individuals who need brief nursing intervention;
- c) Nursing supervision consistent with the Maryland Nurse Practice Act and COMAR 10.27.11 which may include: i. Meeting with provider's staff to discuss how the medical services that are identified in the IP will be implemented; and ii. Education, supervision, and training of waiver participants in health-related matters.
- 6) Treatment protocols such as specialized diets, exercise, and preventive activities developed by licensed professionals as needed and identified in the IP including use of soft foods to prevent choking and a special diet to avoid a food allergy.

- H. Specific provider qualifications apply to the distinct medical professionals who can provide a component of this service. These services must be preauthorized and funded by DDA and must be unavailable from any other source, including Medicaid State plan services (COMAR 10.22.17.8.F and COMAR 10.22.17.11).
- I. Transportation to and from the day activities will be provided or arranged by the licensed provider and funded through the rate system. Records shall clearly indicate both a primary transportation plan and an alternate plan. The provider shall keep accurate records which include the type of transportation used by each participant. The licensee shall use the mode of transportation which achieves the least costly, and most appropriate, means of transportation for the individual with priority given to the use of public transportation when appropriate such as:
 - 1) An individual who lives within walking distance of the day habilitation services center, and who is sufficiently mobile, shall be encouraged to walk;
 - 2) Transportation supplied by family, friends, neighbors, or volunteers; and
 - 3) Free community transportation services.

Specify applicable (if any) limits on the amount, frequency, or duration of this service:

- A. An individual's service plan may include a mix of Day Habilitation, Employment Discovery and Customization, Community Learning services, and Supported Employment. Payment may not be made for more than one units of service per day. A day is comprised of one units.

- B. To be approved, add on and supplemental services must be the most "cost effective," which is the service that is available from any source, is least costly to the State, and reasonably meets the identified need.
- C. No services will be provided to an individual if the service is available to them under a program funded through section 110 of the Rehabilitation Act of 1973 or section 602(16) and (17) of the Individuals with Disabilities Education Act (20 U.S.C. 1401(16 and 17)).
- D. Service is not available under self-direction model.
- E. Transportation to and from the day activities will be provided or arranged by the licensed provider and funded through the rate system. The licensee shall use the mode of transportation which achieves the least costly, and most appropriate, means of transportation for the individual with priority given to the use of public transportation when appropriate.
- F. Any other professional services will only be covered under the waiver if the Program has denied a covered service and the service has been pre-authorized by the DDA.
- G. Payment for services is based on compliance with billing protocols and completed supporting documentation are required as proof of delivery of services as required by the DDA.

Service Delivery Method (check each that applies)

☐ Participant Directed as specified in Appendix E

☒ Provider Managed

Specify whether the service may be provided by (check all that applies):

☐ Legally Responsible Person

☐ Relative

☐ Legal Guardian

Provider Specifications: (Instructions list the following for each type of provider that can deliver the services):

Provider Category	Provider Type Title
Agency	Licensed Vocational or Day Service Providers as per COMAR 10.22.02 and 10.22.07
Agency	DDA Certified Organized Health Care Delivery System (OHCDS) Provider as per COMAR 10.22.20

Provider Specifications for Services

Provider Category: Agency

Provider Type: Licensed Vocational or Day Services Providers as per COMAR 10.22.02 and 10.22.07

Provider Qualifications

License (specify):

Licensed Vocational Service Providers as per COMAR 10.22.02 and 10.22.07

Certificate (specify):

Other Standard (specify):

Staff must possess appropriate license/certifications as required by law based on needs of the person at the time of service.

Nurses completing the Health Risk Screening Tool (HRST) must complete all required HRST training and be certified.

Verification of Provider Qualifications Entity

Responsible for Verification:

- OHCQ for DDA license

Frequency of Verification:

- License - Annual

Provider Category: Agency

Provider Type: DDA Certified Organized Health Care Delivery System (OHCDS) Provider as per COMAR 10.22.20

Provider Qualifications License (specify):

Licensed Vocational or Day service providers as per COMAR 10.22.02 and 10.22.07

Certificate (specify):

DDA certified Organized Health Care Delivery System Provider as per COMAR 10.22.20

Other Standard (specify):

Staff must possess appropriate license/certifications as required by law based on needs of the person at the time of service.

Nurses completing the Health Risk Screening Tool (HRST) must complete all required HRST training and be certified.

Verification of Provider Qualifications

Entity Responsible for Verification:

OHCQ for license

DDA for initial OHCDS certification

Frequency of Verification:

Annual for license

OHCDS Initial certification